

APPLICATION DATA SHEET

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of copies of CDs:: | |
| Sequence submission?:: | |
| Computer Readable Form (CRF):: | |
| Number of copies of CRF:: | |
| Title:: | Novel Process for the Preparation of Roflumilast |
| Attorney Docket Number:: | 26737U |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggest Drawing Figure:: | |
| Total Drawing Sheets:: | 0 |
| Small Entity?:: | No |
| Latin name:: | |
| Variety denomination name:: | |
| Petition included?:: | No |
| Petition Type:: | |
| Licensed U.S. Govt. Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | |

Applicant Information

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|-------------------------------|----------|
| Applicant Authority type:: | Inventor |
| Primary Citizenship Country:: | DE |

Status:: Full Capacity
Given Name:: Bernhard
Middle Name::
Family Name:: KOHL
Name Suffix::
City of Residence:: Konstanz
State or Province of Residence::
Country of Residence:: DE
Street of Mailing address:: Zum Bruehl 9
City of mailing address:: Konstanz
State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: 78465

Applicant Authority type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Bernd
Middle Name::
Family Name:: MUELLER
Name Suffix::
City of Residence:: Konstanz
State or Province of Residence::
Country of Residence:: DE
Street of Mailing address:: Buecklestr. 84a
City of mailing address:: Konstanz
State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: 78467

Applicant Authority type:: Inventor
Primary Citizenship Country:: DE
Status:: Full Capacity
Given Name:: Walter
Middle Name::
Family Name:: PALOSCH
Name Suffix::
City of Residence:: Rielasingen
State or Province of Residence::
Country of Residence:: DE
Street of Mailing address:: Junkernbuehl 39
City of mailing address:: Rielasingen
State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: 78239

Correspondence Information

Correspondence Customer Number:: 034375
Name:: Gary M. Nath
Street of mailing address:: 1030 Fifteenth Street, N.W.
Sixth Floor
City of mailing address:: Washington
State or Province of mailing address:: DC
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20005
Phone number:: (202) 775-8383
Fax number:: (202) 775-8396
E-Mail address:: ip@nathlaw.com

Representative Information

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|---|--------|
| Representative Customer Number:: | 034375 |
|---|--------|

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|----------------------|--------------------------|-----------------------------|-----------------------------|
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| | | | |

Foreign Priority Information

| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
|------------------|-----------------------------|-------------------------------|---------------------------|
| Europe | 03005245.0 | 10 March 2003 (10.03.2003) | Yes |
| | | | |
| | | | |

Assignee Information

Assignee name:: Altana Pharma AG
Street of mailing address:: Byk-Gulden-Str. 2
City of mailing address:: Konstanz
State or Province of mailing address::
Country of mailing address:: DE
Postal or Zip Code of mailing address:: 78467